AMENDMENTS TO THE CLAIMS

Please amend the claims as follows.

Claims 1-24 (Canceled)

Claim 25 (Withdrawn): A composition comprising 16α-bromo-3β-hydroxy-5α-androstan-17-one, 16α-bromo-2-oxa-3β-hydroxy-5α-androstan-17-one, 16α-bromo-3β-hydroxy-11-oxa-5α-androstan-17-one or 16α-bromo-3β-hydroxy-5α-androstan-17-one hemihydrate and one or more nonaqueous liquid excipients, wherein the composition comprises less than about 3% v/v water.

Claim 26 (Withdrawn): The composition of claim 25 wherein the composition comprises less than about 0.3% v/v water.

Claim 27 (Withdrawn): The composition of claim 25 wherein the one or more nonaqueous liquid excipients are two or more of an alcohol, a polyethylene glycol, propylene glycol and benzyl benzoate.

Claim 28 (Withdrawn): The composition of claim 25 wherein the composition is a parenteral formulation.

Claims 29-118 (Canceled)

Claim 119 (Currently amended): A method to treat or ameliorate an innate immune suppression condition in a human associated with radiation, aging, autologous bone marrow transplantation or stem cell transplantation comprising administering to the human an effective amount of 3β,17β-dihydroxyandrost-5-ene <u>is administered once daily for 4, 5, 6 or 7 consecutive days</u> by intramuscular, intradermal or subcutaneous administration whereby the number or activity of neutrophils in circulation in the human is increased.

Claim 120 (Currently amended): The method of claim 119 wherein the 3β,17β-dihydroxyandrost-5-ene is administered once daily for 5, 6 or 7 consecutive days ~~is administered once daily for 4, 5, 6 or 7 consecutive days~~.

Claim 121 (Previously presented): The method of claim 120 wherein about 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 250 mg or 300 mg per day of 3β,17β-dihydroxyandrost-5-ene is administered.

Claim 122 (Previously presented): The method of claim 119 wherein the 3β,17β-dihydroxyandrost-5-ene is administered once daily for 5 consecutive days.

Claim 123 (Previously presented): The method of claim 122 wherein about 200 mg per day of 3β,17β-dihydroxyandrost-5-ene is administered.

Claim 124 (Previously presented): The method of claim 123 wherein the innate immune suppression condition is associated with radiation.

Claim 125 (Previously presented): The method of claim 124 wherein the 3β,17β-dihydroxyandrost-5-ene is administered by intramuscular administration.

Claim 126 (Previously presented): The method of claim 122 wherein about 150 mg per day of 3β,17β-dihydroxyandrost-5-ene is administered.

Claim 127 (Previously presented): The method of claim 122 wherein about 250 mg per day of 3β,17β-dihydroxyandrost-5-ene is administered.

Claim 128 (Previously presented): The method of claim 122 wherein about 300 mg per day of 3β,17β-dihydroxyandrost-5-ene is administered.

Claim 129 (Previously presented): The method of claim 120 wherein about 1.5 mg/kg/day, about 2 mg/kg/day, about 2.5 mg/kg/day, about 3.0 mg/kg/day, about 4 mg/kg/day or about 6 mg/kg/day of 3β,17β-dihydroxyandrost-5-ene is administered.

Claim 130 (Previously presented): The method of claim 119 wherein the innate immune suppression condition is associated with aging, autologous bone marrow transplantation or stem cell transplantation.

Claim 131 (Previously presented): The method of claim 130 wherein the 3β,17β-dihydroxyandrost-5-ene is administered once daily for 4, 5, 6 or 7 consecutive days.

Claim 132 (Previously presented): The method of claim 131 wherein 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 250 mg or 300 mg per day of 3β,17β-dihydroxyandrost-5-ene is administered.

Claim 133 (Previously presented): The method of claim 132 wherein the 3β,17β-dihydroxyandrost-5-ene is administered once daily for 5 consecutive days.

Claim 134 (Previously presented): The method of claim 133 wherein about 150 mg per day of 3β,17β-dihydroxyandrost-5-ene is administered.

Claim 135 (Previously presented): The method of claim 133 wherein about 200 mg per day of 3β,17β-dihydroxyandrost-5-ene is administered.

Claim 136 (Previously presented): The method of claim 133 wherein about 250 mg per day of 3β,17β-dihydroxyandrost-5-ene is administered.

Claim 137 (Previously presented): The method of claim 133 wherein about 300 mg per day of 3β,17β-dihydroxyandrost-5-ene is administered.

Claim 138 (Previously presented): The method of claim 135 wherein the 3β,17β-dihydroxyandrost-5-ene is administered by intramuscular administration.

Claim 139 (Currently amended): A method to treat or ameliorate an innate immune suppression condition associated with radiation, aging, autologous bone marrow transplantation or stem cell transplantation in a non-human primate comprising administering to the non-human primate an effective amount of 3β,17β-dihydroxyandrost-5-ene daily for 3, 4, 5, 6 or 7 consecutive days by intramuscular, intradermal or subcutaneous injection, whereby the number or activity of neutrophils in circulation in the non-human primate is increased.

Claim 140 (Previously presented): The method of claim 139 wherein the non-human primate is a cynomolgus monkey or a macaque monkey.

Claim 141 (Previously presented): The method of claim 139 wherein the innate immune suppression condition is associated with radiation.

Claim 142 (Currently amended): The method of claim 141 wherein the 3β,17β-dihydroxyandrost-5-ene is administered daily for 5, 6 or 7 consecutive days ~~daily for 3, 4, 5, 6 or 7 consecutive days~~.

Claim 143 (Previously presented): The method of claim 142 wherein the 3β,17β-dihydroxyandrost-5-ene is administered for 5 consecutive days.

Claim 144 (Previously presented): The method of claim 143 wherein the non-human primate is a cynomolgus monkey or a macaque monkey.

Claim 145 (Previously presented): The method of claim 144 wherein the innate immune suppression condition is associated with radiation.

Claim 146 (Previously presented): The method of claim 142 wherein about 4-40 mg/kg/day of 3β,17β-dihydroxyandrost-5-ene is administered.